



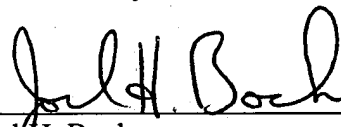
Attorney Docket No.: IDEAL 413
PATENT

#4/a
3-1-01
Jama

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: William E. Blaha] Examiner: S. Ore
Serial No.: 09/492,369] Art Unit 2833
Filed: January 27, 2000]
For: WIRE CONNECTOR WITH]
EXTENSION]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231 on February 21, 2001.


Joel H. Bock
Registration No. 29,045

Commissioner of Patents
Washington, D.C. 20231

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AMENDMENT

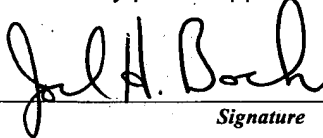
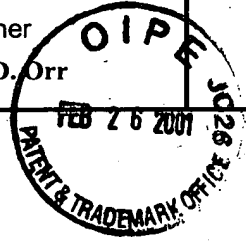
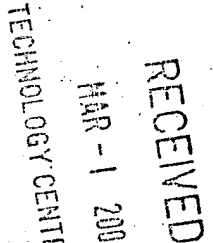
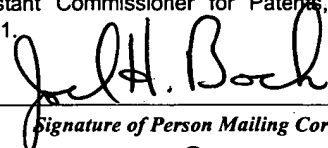
In response to the Office Action of November 21, 2000, please amend the above application as follows:

REWRITTEN CLAIMS IN CLEAN FORM

Please substitute the following clean claim for claim 3.

3. (Amended) The wire connector of claim 2 wherein the housing is a two-part housing including a base and a cap.

GP/2833

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. Ideal 413	
Applicant(s): William E. Blaha					
Serial No. 09/492,369	Filing Date 1/27/00	Examiner Shanetta D. Orr	Group Art Unit 2833		
Invention: WIRE CONNECTOR WITH EXTENSION					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	8	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3	3 =	0 x	\$80.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1039 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: February 21, 2001		
Joel H. Bock, Reg. No. 29,045 COOK, ALEX, McFARRON, MANZO, CUMMINGS & MEHLER, LTD. 200 West Adams Street - Suite 2850 Chicago, IL 60606 312/236-8500 FAX 312/236-8176					
CC:					
			I certify that this document and fee are being deposited on 2/21/01 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.		
			 Signature of Person Mailing Correspondence		
			Joel H. Bock Typed or Printed Name of Person Mailing Correspondence		